

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Number: 09/589,285

Group Art Unit: 1646

Filed: June 8, 2000

Examiner: Prasad, S.

Title: Methods of Treatment of Immune

Atty. Docket No. PF343P3C4

System Related Disorders Using Neutrokine-alpha (as amended)

AMENDMENT AND RESPONSE UNDER 37 C.F.R. §1.111 WITH STATEMENT UNDER 37 C.F.R. §1.125(b)(1)

Commissioner for Patents Washington, D.C. 20231

Sir:

In response to the Official Action dated November 6, 2001 (Paper No. 8), Applicants request that the following amendments and remarks be entered into the aboveidentified application. Applicants submit concurrently herewith:

Version with Markings to Show Changes Made;

(b) Substitute Specification;

- Version of the Substitute Specification to Show Changes Made; (c)
- A Clean Version of the Entire Set of Pending Claims; (d)
- First Supplemental Information Disclosure Statement Pursuant to 37 C.F.R. (e) § 1.56 with a revised Form PTO/SB/08;
- Substitute Sequence Listing in Paper and CRF formats; (f)
- Statements Under 37 C.F.R. §§ 1.825(a) and (b); (g)
- A Petition for a Three Month Extension of Time with appropriate fee; and (h)
- Fee Transmittal Sheet. (i)

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			บร	Patent ai		red for use through 10/31/2002. ON ark Office; U.S. DEPARTMENT OF	IB 0651-003
Under the Paperwork Reduction Act of 1995, no persons are requi	red to	espond					
FEE TRANSMITTAL	1				Com	plete if Known	
FEE INANSWILLIAL	1	Applic	ation	Numb	er	09/589,285	
for FY 2002		Filing	Date			June 8, 2000	mi
Patent fees are subject to annual revision.		First I	Vame	d Inver	ntor	Guo-Liang Yu	呈
· · · · · · · · · · · · · · · · · · ·	-	Exam	iner N	lame		S. Prasad	<u> </u>
Applicant claims small entity status. See 37 CFR 1.27		Group	Art U	Init		1646	Ż
TOTAL AMOUNT OF PAYMENT (\$) 1100.00		Attom	ey Do	cket No).	PF343P3C4	55
METHOD OF PAYMENT (check all that apply)				FEE	CALCU	LATION (continued)	
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X Deposit Account	Large	Entity	Sma	II Entity			Š
Deposit Account 08-3425	Fee	Fee	Fee	Fee	-	Fee Description	_
Number	Code	(\$)	Code	(\$)		ree Description	Fee Paid
Deposit Account Human Genome Sciences, Inc.	105	130	205	65	Surcharge	e – late filing fee or oath	
Name The Commissioner is hereby authorized to: (check all that apply)	127	50	227	25	Surcharge sheet.	e – late provisional filing fee or cove	
X Charge fee(s) indicated below X Credit any overpayments	139	130	139	130		sh specification	
Charge any additional foo(s) during the pandency of this					_	•	<u> </u>
application	147	2,520	147	2,520	_	request for ex parte reexamination ng publication of SIR prior to	<u> </u>
Charge fee(s) indicated below, except for the filing fee	112	920*	112	920*	Examiner	action	
to the above-identified deposit account.	113	1,840*	113	1,840*	Requestir Examiner	ng publication of SIR after action	·
FEE CALCULATION	115	110	215	55	Extension	for reply within first month	
1. BASIC FILING FEE	116	400	216	200	Extension	for reply within second month	
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe	117	920	217	460	Extension	for reply within third month	920.00
Code (\$) Code (\$) Fee Description Fee Paid	118	1,440	218	720	Extension	for reply within fourth month	
101, 740 201 370 Utility filing fee	128	1,960	228	980		for reply within fifth month	
106 330 206 165 Design filing fee	119	320	219	160	Notice of		
107 510 207 255 Plant filing fee 108 740 208 370 Reissue filing fee	120 121	320 280	220	160 140		ief in support of an appeal or oral hearing	
114 160 214 80 Provisional filing fee	138	1,510	138	1,510		institute a public use proceeding	
'	140	110	240	55		revive - unavoidable	
SUBTOTAL (1) (\$) 0.00	141	1,280	241	640	Petition to	revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	142	1,280	242	640	Utility issu	ue fee (or reissue)	<u> </u>
Extra Fee from Fee Paid Claims below	143	460	243	230	Design is:	sue fee	
Total Claims 93 -277** = x = 0.00	144	620	244	310	Plant issu	e fee	
Independent 12 -24** = x = 0.00	122	130	122	130	Petitions 1	to the Commissioner	
Multiple Dependent =	123	50	123	50	Processin	g fee under 37 CFR 1.17(q)	
Large Entity Small Entity	126	180	126	180	Submission	on of Information Disclosure Stmt	180.00
Fee Fee Fee Code (\$) Code (\$) Fee Description	581	40	581	40		each patent assignment per	
103 18 203 9 Claims in excess of 20	146	740	246	370	Filing a su	times number of properties) ubmission after final rejection	
102 84 202 42 Independent claims in excess of 3					(37 CFR 1	I.129(a)) additional invention to be	<u> </u>
104 280 204 140 Multiple dependent claim, if not paid	149	740	249	370	examined	(37CFR 1 129/b))	<u> </u>
109 84 209 42 ** Reissue independent claims over original patent	179	740	279	370	•	or Continued Examination (RCE)	<u></u>
110 18 210 9 ** Reissue claims in excess of 20	169	900	169	900		or expedited examination n application	
and over original patent	Other	fee (spe	cify) .				
SUBTOTAL (2) (\$) 0.00	*Redu	uced by i	Basic F	Filing Fee	Paid	SUBTOTAL (3) (\$)	1100.00
**or number previously paid, if greater, For Reissues, see above							

SUBMITTED BY	Complete (Complete (if applicable)		
Name (Print/Type) Kenley K, Hoover	Registration No. (Attorney/Agent) 40,3	302 Telephone	(301) 610-5771	
Signature Lean	Hor	Date	May 3, 2002	